



Complete Summary

TITLE

Breast cancer: percentage of patients for whom tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1c or stage II or III hormone receptor positive breast cancer.

SOURCE(S)

ASCO/NCCN quality measures: breast and colorectal cancers. Alexandria (VA): American Society of Clinical Oncology, National Comprehensive Cancer Network, Inc.; 2007 Apr. 5 p.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of patients for whom tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1c or Stage II or III hormone receptor positive breast cancer.

RATIONALE

National Comprehensive Cancer Network (NCCN) Breast Cancer Treatment Guideline for Invasive Cancer Guideline Recommendations v2.2006:

BINV-5, 6 and 9 and **BINV-E**. Recommends hormonal therapy for patients with tumors great than 0.5 cm or with positive lymph nodes and positive estrogen receptors (ER) and/or progesterone receptors (PR). NCCN recommends the use of aromatase inhibitors for post-menopausal patients only. NCCN does not differentiate between patients who have or have not been taking tamoxifen for risk reduction.

PRIMARY CLINICAL COMPONENT

Breast cancer; hormone receptor positive; AJCC T1c; Stage II or III; tamoxifen; third generation aromatase inhibitor

DENOMINATOR DESCRIPTION

- Women
- Age greater than or equal to 18 at time of diagnosis
- Known or assumed first or only cancer diagnosis
- Epithelial malignancy only
- AJCC T1c, or Stage II or III
- Primary tumor is estrogen receptor (ER) positive or progesterone receptor (PR) positive
- All or part of first course of treatment performed at the reporting facility
- Known to be alive within 1 year (365 days) of diagnosis

NUMERATOR DESCRIPTION

Consideration or administration of tamoxifen or third generation aromatase inhibitor initiated within 1 year (365 days) of date of diagnosis

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Variation in quality for the performance measured

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Desch CE, McNiff KK, Schneider EC, Schrag D, McClure J, Lepisto E, Donaldson MS, Kahn KL, Weeks JC, Ko CY, Stewart AK, Edge SB. American Society of Clinical Oncology/National Comprehensive Cancer Network Quality Measures. J Clin Oncol 2008 Jul 20;26(21):3631-7. [46 references] [PubMed](#)

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Hospitals

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Female (only)

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better
Living with Illness

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Women, age greater than or equal to 18 years, with a diagnosis of AJCC T1c or Stage II or III hormone receptor positive breast cancer (see the related "Denominator Inclusions/Exclusions" field)

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

- Women
- Age greater than or equal to 18 at time of diagnosis
- Known or assumed first or only cancer diagnosis
- Epithelial malignancy only
- AJCC T1c, or Stage II or III
- Primary tumor is estrogen receptor (ER) positive or progesterone receptor (PR) positive
- All or part of first course of treatment performed at the reporting facility

- Known to be alive within 1 year (365 days) of diagnosis

Exclusions

Unspecified

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition

Therapeutic Intervention

DENOMINATOR TIME WINDOW

Time window brackets index event

NUMERATOR INCLUSIONS/EXCLUSIONS**Inclusions**

Consideration or administration of tamoxifen or third generation aromatase inhibitor initiated within 1 year (365 days) of date of diagnosis

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Registry data

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

External comparison at a point in time
External comparison of time trends
Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

The American Society of Clinical Oncology/National Comprehensive Cancer Network (ASCO/NCCN) Quality Measures are the result of a collaborative effort to answer the call for evidence-based rigorously developed, scientifically sound measures that can be used in national accountability programs dedicated to improving the quality of cancer care. Several features of these measures are noteworthy. The final measures were derived from measure sets from the National Initiative for Cancer Care Quality (NICCQ) and NCCN that have undergone extensive testing and validation supplemented by nationally accepted practice guidelines. Furthermore, prioritization of candidate measures used an explicit, data-driven process designed to ensure that measure adoption would have the maximal beneficial impact on cancer outcomes in the population.

Refer to the article cited below and in the "Companion Documents" field for additional information.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Desch CE, McNiff KK, Schneider EC, Schrag D, McClure J, Lepisto E, Donaldson MS, Kahn KL, Weeks JC, Ko CY, Stewart AK, Edge SB. American Society of Clinical Oncology/National Comprehensive Cancer Network Quality Measures. J Clin Oncol 2008 Jul 20;26(21):3631-7. [46 references] [PubMed](#)

Identifying Information

ORIGINAL TITLE

Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1c or stage II or III hormone receptor positive breast cancer.

MEASURE COLLECTION

[ASCO/NCCN Quality Measures: Breast and Colorectal Cancers](#)

MEASURE SET NAME

[Breast Cancer Measures](#)

SUBMITTER

American Society of Clinical Oncology
National Comprehensive Cancer Network

DEVELOPER

American Society of Clinical Oncology/National Comprehensive Cancer Network

FUNDING SOURCE(S)

American Society of Clinical Oncology (ASCO) and National Comprehensive Cancer Network (NCCN)

COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

Desch CE; McNiff KK; Schneider EC; Schrag D; McClure J; Lepisto E; Donaldson MS; Kahn KL; Weeks JC; Ko CY; Stewart AK; Edge SB

FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

Certain relationships marked with a "U" are those for which no compensation was received; those relationships marked with a "C" were compensated.

Employment or Leadership Position: Joan McClure, National Comprehensive Cancer Network (C); Stephen B. Edge, American College of Surgeons (U), National Comprehensive Cancer Network (U).

Consultant or Advisory Role: None.

Stock Ownership: None.

Honoraria: Eric C. Schneider, ASCO.

Research Funding: Eric C. Schneider, ASCO; Katherine L. Kahn -- received research support as co-PI of NCCQ study.

Expert Testimony: None.

Other Remuneration: None.

ENDORSER

National Quality Forum

ADAPTATION

Measure was adapted from another source.

RELEASE DATE

2006 Jan

REVISION DATE

2007 Apr

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

ASCO/NCCN quality measures: breast and colorectal cancers. Alexandria (VA): American Society of Clinical Oncology, National Comprehensive Cancer Network, Inc.; 2007 Apr. 5 p.

MEASURE AVAILABILITY

The individual measure, "Tamoxifen or Third Generation Aromatase Inhibitor is Considered or Administered Within 1 Year (365 Days) of Diagnosis for Women with AJCC T1c or Stage II or III Hormone Receptor Positive Breast Cancer," is published in "ASCO/NCCN Quality Measures: Breast and Colorectal Cancers". This document is available in Portable Document Format (PDF) from the [American Society of Clinical Oncology \(ASCO\) Web site](#).

For more information, please contact the American Society of Clinical Oncology (ASCO) at 2318 Mill Road, Suite 800, Alexandria, VA 22314; Telephone: 571-483-1300; Fax: 703-684-8364; Web site: www.asco.org/qualitymeasures.

COMPANION DOCUMENTS

The following is available:

- Desch CE, McNiff KK, Schneider EC, Schrag D, McClure J, Lepisto E, Donaldson MS, Kahn KL, Weeks JC, Ko CY, Stewart AK, Edge SB. American Society of Clinical Oncology/National Comprehensive Cancer Network Quality Measures. J Clin Oncol 2008 Jul 20;26(21):3631-7.

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NQMC STATUS

This NQMC summary was completed by ECRI Institute on March 31, 2009. This information was verified by the measure developers on June 5, 2009.

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National Comprehensive Cancer Network

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For more information, please contact the National Comprehensive Cancer Network at 275 Commerce Drive, Suite 300, Fort Washington, PA 19034; Telephone: 215-690-0255; Fax: 215-690-0280; Web site: www.nccn.org.

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